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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875   |   |   |  |   |   |  |  | Application or Docket Number<br>10/526,458 |                        |    | ing Date<br>03/2005   | To be Mailed           |
|---|---|---|--|---|---|--|--|--|------------------------|----|-----------------------|------------------------|
|   | Al  | PPLICATION A                              | AS FILE  | SMALL                                       | OTHER THAN SMALL ENTITY OR SMALL ENTITY |  |  |  |                        |    |                       |                        |
|   | FOR   | NU  | NUMBER FILED   |   | NUMBER EXTRA                            |  |  | RATE (\$)                                  | FEE (\$)               |    | RATE (\$)             | FEE (\$)               |
|   | BASIC FEE<br>(37 CFR 1.16(a), (b),                              | or (c))                                   | N/A  |   | N/A                                     |  |  | N/A  |                        | 1  | N/A                   |                        |
|   | SEARCH FEE<br>(37 CFR 1.16(k), (i),                             | or (m))                                   | N/A  |   | N/A                                     |  |  | N/A  |                        | ]  | N/A                   |                        |
|   | EXAMINATION FE<br>(37 CFR 1.16(a), (p),                         | E<br>or (q))                              | N/A  |   | N/A                                     |  |  | N/A  |                        |    | N/A                   |                        |
| TO<br>(37   | FAL CLAIMS<br>CFR 1.16(i))                                      |   | minus 20 =   |   | •                                       |  |  | x \$ =                                     |                        | OR | x s =                 |                        |
|   | EPENDENT CLAIM<br>CFR 1.16(h))                                  | S   | minus 3 = *  |   | ,                                       |  |  | x \$ =                                     |                        | 1  | x \$ =                |                        |
|   | APPLICATION SIZE<br>(37 CFR 1.16(s))                            | FEE sheet<br>is \$25<br>additi            | specification and drawing<br>s of paper, the application<br>60 (\$125 for small entity) f<br>onal 50 sheets or fraction<br>S.C. 41(a)(1)(G) and 37 C |   |   | n size fee due<br>for each<br>i thereof. See |  |  |                        |    |                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))   |   |   |  |   |   |  |  |  |                        | ]  |                       |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2.   |   |   |  |   |   |  |  | TOTAL                                      |                        | ]  | TOTAL                 |                        |
| APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTI   |   |   |  |   |   |  |  |  |                        |    |                       |                        |
| AMENDMENT   | 07/21/2008  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR |   | PRESENT<br>EXTRA                             |  | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|   | Total (37 CFR<br>1.16(i))                                       | · 32                                      | Minus  | <b></b> 36                                  |   | = 0  |  | x \$ =                                     |                        | OR | X \$50=               | 0                      |
|   | Independent<br>(37 CFR 1,16(h))                                 | • 2                                       | Minus  | 3   |   | = 0  |  | x \$ =                                     |                        | OR | X \$210=              | 0                      |
|   | Application Size Fee (37 CFR 1.16(s))                           |   |  |   |   |  |  |  |                        |    |                       |                        |
| Ĺ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |  |   |   |  |  |  |                        | OR |                       |                        |
|   |   |   |  |   |   |  |  | TOTAL<br>ADD'L<br>FEE                      |                        | OR | TOTAL<br>ADD'L<br>FEE | 0                      |
| (Column 1) (Column 2) (Column 3)  |   |   |  |   |   |  |  |  |                        |    |                       |                        |
| AMENDMENT   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHE<br>NUMBE<br>PREVIOL<br>PAID F         | ER<br>JSLY                              | PRESENT<br>EXTRA                             |  | RATE (\$)                                  | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|   | Total (37 CFR<br>1,16())  |   | Minus  |   |   |  |  | x \$ =                                     |                        | OR | x \$ =                |                        |
| Δ   | Independent<br>(37 CFR 1/16(h))                                 |   | Minus  | ***   |   |  |  | X \$ =                                     |                        | OR | x s =                 |                        |
| 핇   | Application Size Fee (37 CFR 1.16(s))                           |   |  |   |   |  |  |  |                        | ]  |                       |                        |
| ΑM  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) |   |  |   |   |  |  |  |                        | OR |                       |                        |
|   |   |   |  |   |   |  |  |  |                        | OR | TOTAL<br>ADD'L<br>FEE |                        |
| If the entry in column 1 is less than the entry in column 2, write 0" in column 3.  If the "Highest Number Previously Paid For IN THIS SPACE is less than 8.0, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20".  "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  MARQUETTA MCGGE/  The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". |   |   |  |   |   |  |  |  |                        |    |                       |                        |

This collection of information is equated by 37 CER. 1.16. The information is required to obtain or retain a besteff by the public which his lost figured by the USFTO to monoceasil an application. Confidentiality is ownered by 80 Sec. 22 and 37 CEF 1.15. This collection is estimated in table 22 annuates to complete, another ingolates properties, and submitting the completed application form to the USFTO. Time well vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or seggestions for reducing this burdon, should be sent to the CEM information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrias, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrias, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS